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Bib Data Sheet

CONFIRMATION NO. 6829

<b>SERIAL NUMBER</b> 09/781,512	<b>FILING DATE</b> 02/12/2001 <b>RULE</b>	<b>CLASS</b> 434	<b>GROUP ART UNIT</b> 3712	<b>ATTORNEY DOCKET NO.</b> DAM 533-00	
<b>APPLICANTS</b> James A. Genovese, Street, MD; <b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/184,376 02/23/2000 <b>** FOREIGN APPLICATIONS *****</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 42	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 24211					
<b>TITLE</b> System and method for hazardous incident decision support and training					
<b>FILING FEE RECEIVED</b> 1346	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		